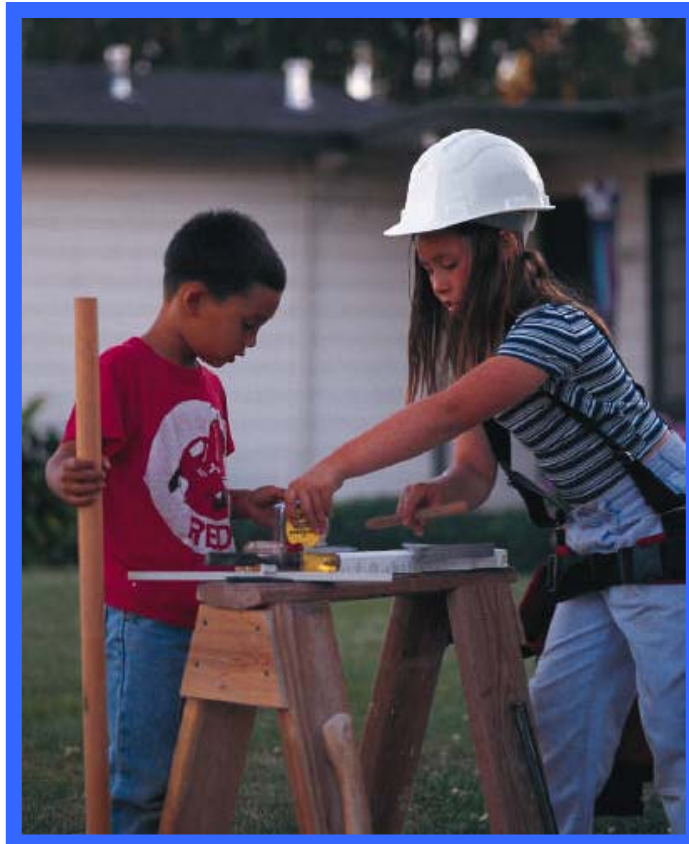


California Child and Family Services Review

# System Improvement Plan



## Sonoma County

**September 2004**



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## **Sonoma County System Improvement Plan**

### **Summary Assessment**

#### **Discussion of System Strengths and Areas Needing Improvement**

##### **1. OUTCOMES, STRENGTHS**

Sonoma County maintains a strong commitment to and a strong practice of pre-placement prevention services. This is evidenced by the higher number of cases referred to the Family Maintenance program as opposed to Family Reunification as a first response. Despite this strong preference, county practice has balanced this approach by looking at safety factors such as recurrence of abuse, age of the victim and parental capacity when developing safety plans for children. Recurrence of abuse following reunification and in cases where children were left in the home has been historically below State and Federal targets. Other evidence of this strength is a commitment to maintaining a strong community presence through school-based social workers and the extension of this effort through a limited Differential Response program funded through the Sonoma County First Five Commission.

Permanency for children in care exists as a strength as evidenced by performance on the permanency outcome measures for adoption, multiple placements, placement with siblings, and reentry into care following reunification. In these areas Sonoma meets and often exceeds performance on both State and Federal measures.

Utilization of management reporting tools such as Safe Measures will assist in monitoring process outcomes, such as timely response and timely social worker visits. Full utilization of CWS/CMS will only continue to improve performance in this area.

##### **2. OUTCOMES, AREAS NEEDING IMPROVEMENT**

There are several areas in need of improvement. Time to reunification is lengthy and is hampered by several issues as discussed in the Self Assessment. Focusing on best practices such as family group conferencing and increasing parent and child participation in developing case plans may serve to improve outcomes. Outcomes for Native American and African American children need improvement in areas such as pre-placement prevention, placement and placement stability. Existing data does not point to a single factor for the overrepresentation of these two groups in child welfare programs and further analysis will be hindered by the system limitations of CWS/CMS. However, the System Improvement Plan will afford time to review the agency's ability to deliver culturally competent practices. Also needing consideration is the community's tendency to report these groups in higher numbers, as well as the risk assessment practices used by Family, Youth & Children's Services (FY&C) once a referral is received.

Drawing on agency strengths in working with Hispanic children and families will give some direction about where services can be improved for these other minority populations. A concerted effort to improve staff training and resource development for these populations will require collaborative action on the part of the agency, community partners and resource families.

### 3. SYSTEMIC FACTORS, STRENGTHS

Sonoma County HSD and Probation develop and maintain strong partnerships and collaborations with other agencies in the county, as well as other jurisdictions and the community. These partnerships strengthen the agencies through assistance with funding, such as a grant from Sonoma County First Five Commission for Differential Response, and flexible use of CalWORKs dollars within the department to fund some child welfare staff. The involvement of FY&C staff in intra-and-interdepartmental partnerships enhances services to families, such as the co-location of a CWS social worker in CalWORKs in an integrated services program. Through partnerships in the community, such as the placement of out-stationed social workers in three school-based programs, the HSD is able to enhance services to families in need.

Examples of collaborations include:

- Valley of the Moon Children's Foundation, a public-private capital campaign effort to raise funds for a new emergency shelter
- Sonoma County Youth and Family Partnership; the multi-agency oversight committee for county services to children
- Project ESP, the HSD's project for integrating services between CWS and CalWORKs
- Promoting Safe and Stable Families and the participation of an FY&C social worker on Multi-Disciplinary Teams in three sites
- Differential Response
- Staff participation on the Maternal and Child Health boards, the Human Services Commission and other entities
- Strong partnership with the Santa Rosa Junior College and California State University at Sonoma, evidenced by the development of the part-time MSW program at CSUS, and the use of Title IV-E interns
- Successful Transitions, a stipend program for emancipated foster youth, funded by a private donor in the community, and managed as a partnership with the Santa Rosa Junior College and the HSD Employment and Training Division

The county plans to build on this strength as we work with foster parents, relative caregivers and schools to improve permanency for youth.



Sonoma County is able to offer a rich array of services. FY&C social workers and Probation Department probation officers have the ability to arrange for therapy, parenting classes, alcohol and other drugs services, and advocacy services in almost any situation. In many cases, specialized services can also be arranged within the county. Deficiencies do exist; services are

difficult to locate in western and northern Sonoma County and specialized services for non-English speaking families remain limited.



As an alternative to out-of-home placement, the Juvenile Probation Department operates the Home Treatment Program. This program is an attempt to approximate the level of service normally provided by group homes and residential treatment centers without the minor being removed from his/her home and community. The purpose of the Home Treatment Program is to address emotional and behavioral issues by utilizing the combined resources of the Probation Department and the community. The treatment team provides monitoring and supervision, assists parents in setting and maintaining appropriate behavioral limits and helps to facilitate the delivery of appropriate therapy. The treatment team consists of a program coordinator, contract group co-facilitators and two (Probation Camp) Field Supervisors. The program works closely with the family and requires the participation and input from parents as well as the minor.

The Home Treatment Program currently has 18 minors and the Probation Department plans to increase the caseload to 20 once an additional Probation Officer II is assigned to the program. This Probation Officer II position is expected to be filled within the next 60 days. Additionally, the Probation Department is pursuing the possibility of assigning an additional Probation Camp supervisor to the Home Treatment Program and increasing the population to approximately 25 minors.



Openness with the community. The HSD has always been willing to discuss issues and areas needing improvement with the community in an open, non-defensive, accepting manner.

The HSD has reached out to educate the community about child welfare services, has forged alliances among the local news media and has seen local media focus on the good work we do. Examples include:

- FY&C Speakers Bureau, which made presentations to over 1,200 people in calendar year 2003.
- Helping Hands, an annual feature of the local newspaper, the Press Democrat, which ran profiles of youth at Valley of the Moon Children's Home in order to highlight the needs for a new facility, and address the needs of foster youth in general.
- Presentations on local radio stations by the HSD Department Head and the FY&C Division Director, to educate the public about child welfare issues.
- A public service announcement campaign, in Spanish, done in August 2003, to make the public aware of child abuse reporting and the availability of voluntary Family Maintenance services.
- The annual Child Abuse Prevention Campaign
- Annual Foster Parent Recognition activities

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The staff of the FY&C Division are also a strength the county relies upon to make the upcoming necessary changes in child welfare. FY&C has an educated and experienced social work staff. Approximately 85 % of staff have graduate degrees in social work or counseling and, counter to national trends of rapid staff turnover in child welfare, there is staff longevity.

Staff actively promote change and are involved with community partners in the improvement of services. In June 2003, the FY&C Division began a Workload Reconfiguration process as a way of preparing for position losses due to budget constraints. More than 20 line staff participated in workgroups and drafted recommendations that were submitted to management. A transition team of line staff and managers is implementing the approved recommendations. FY&C staff are represented on the Core Team and have volunteered to take on specific areas of the System Improvement Plan. Many staff have begun to utilize Safe Measures as their own case management tool.

Additionally, staff engage community partners through out-stationing. Three social workers work closely with CBOs in school-based settings. A fourth social worker is stationed within the Santa Rosa Police Department and a fifth is co-located with SonomaWORKS (CalWORKs).

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#### 4. SYSTEMIC FACTORS, AREAS NEEDING IMPROVEMENT

While the county does collaborate well, and the HSD does have many strong partnerships in both the public and private sectors, the existing network of services does not have a “hub.” The county continues to work toward the goal of a unified service array for children, using groups like the Sonoma County Youth and Family Partnership, Project ESP, and Differential Response, but there is still much work to be done. Staff from the FY&C Division made a visit to Solano County in the fall of 2003 and were impressed with that county’s Children’s Network. A family who makes contact with any family resource center will be referred to an established network of service providers, in their geographic area of the county. In this “one door” model, any door is the “right” door for services. Sonoma County will review the Children’s Network model.

An area where the lack of a cohesive plan is noticeable is in the area of educational needs of foster youth. With 41 school districts, lack of adequate funding, and lack of clear lines of communication between the HSD and the schools, it is difficult to meet the needs of these children. The creation of an Education Specialist, sited at the Sonoma County Office of Education, has been an immense help in this area.

Another area needing review is the service array. Although the county’s service array is robust, it lacks specialized services for families of color, especially Native American families and non-English speakers. A concerted, cohesive plan for the well-being of children would help identify service gaps and needs.

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County-licensed foster parents need a stronger sense of connection with the mission of child welfare services, and with the social workers themselves. They are our primary partners in working with children in out-of-home care. This lack of connection adversely affects foster parent retention and recruitment.

In the same area, the county needs to reach out to people of color to be foster parents, and to provide more services to relative caregivers. Stronger efforts in this area could break down barriers of mistrust that may exist between families of color and child welfare services.

For people who are interested in becoming foster parents, the idea of being asked to consider bonding with and even adopting a child while simultaneously supporting the reunification of the child with the birth family can be emotionally daunting. Potential foster parents may find this demand a difficult one. At the same time, this is an achievable goal as evidenced by the strong working relationship between State adoptions and the Division in developing a cohesive concurrent planning process. The HSD will need to work with the local foster parent association and State Adoptions to help develop realistic strategies for potential foster parents to address this heart-rendering paradox.

Sonoma County also needs to review ways to better engage parents who are involved in Family Reunification. Staff who were interviewed stated that parents are often in denial or overwhelmed and do not fully understand the expectations of FR until late in the process. A non-adversarial mentor or coach could break the process down into smaller goals that a parent would be able to accomplish. Programs located in other counties, such as Parent Leaders and Mentoring Moms are examples of ways to engage and support FR parents in the process sooner.

#### Areas for the Peer Quality County Review (PQCR):

Sonoma County will be exploring the resources that surround reunification efforts, including:

- Coaches or mentors for reunifying families (Mentoring Moms, etc);
- SB 163 or wraparound models to allow the county to return children home more quickly;
- Others strategies to streamline reunification while not increasing the incidence of foster care reentry

The county will also explore foster parent recruitment and retention strategies, including targeted recruitment, and developing resources for kin and non-related extended family caregivers.

Sonoma County would like to offer the following existing programs as possible strategies for other counties to model:

- Voluntary Family Maintenance
- ICWA Roundtable Meetings
- Differential Response

- Project Empower, Support, Protect (ESP)
- Monthly Meetings with the Commissioner, HSD and Attorneys

The table below lists each outcome measure and systemic factor and shows the action Sonoma County plans for it.

Outcome Measure	Year One SIP	Focus	Identify	Strength
1A, 1B – Recurrence of Maltreatment	X			
1C – Abuse in FC		X		
2A –Recurrence of abuse when children remain at home				X
2B –Timely Response			X	
2C –Timely Monthly Visits	X			
3A/3E –Timely Reunification	X			
3A/3D –Timely Adoption			X	
3C/3B –Percentage of Multiple Placements				X
3F/3G –Foster care re-entry after reunification				X
4A –Placement with Siblings		X		
4B –Least Restrictive Placement			X	
4E –ICWA placement preferences			X	
8A –Outcomes for emancipating youth			X	

Systemic Factor	Year One SIP	Focus	Identify	Strength
Information Systems				X
Case Review				X
Parent/Child Involvement in Case Planning		X		
Foster Parent Recruitment, Retention and Training	X			
Quality Assurance				X
Service Array			X	
Training		X		
Training; CWS/CMS	X			
Agency Collaboration				X



## I. Narrative

### A. Local Planning Bodies

*Please list and briefly describe those local planning bodies that had input into the Self-Assessment and the SIP or will have a role in fulfilling the SIP. These local planning bodies are usually comprised of local stakeholders and agencies that serve the families and children who are in the CWS system or are at risk of entry into the system, along with consumers of CWS services and advocates. Examples include planning bodies that support collaboration among children's service providers, early childhood and prevention services, system of care networks, etc. You should include a list of names and affiliations of members of the SIP team that worked on your System Improvement Plan.*

Sonoma County's Core Self-Assessment Team comprises the following agencies:

- Mental Health
- Public Health
- State Adoptions
- Probation
- Redwood Empire Foster Parents Association
- Sonoma County Office of Education
- Law Enforcement
- Human Services Department (HSD), Family, Youth and Children's Staff
- HSD, Employment and Training Staff

In developing both the Self Assessment and the System Improvement Plan (SIP), Sonoma County drew from the knowledge and expertise of the following groups:

- HSD Family, Youth and Children's staff, including two meetings with job stewards
- Juvenile Probation Staff
- Local Tribal Indian Child Welfare Act representatives
- Community-based organizations (CBOs)
- The general public via two public meetings

In developing the SIP, the county developed work groups that included foster parents, line staff, and staff from State Adoptions and Probation. A copy of the participants of the SIP planning group is attached.

The following groups, bodies or partnerships have provided input for the Self Assessment, assisted with the SIP or will help the county implement its SIP changes.

#### Sonoma County Youth and Family Partnership (SCYFP):

As Sonoma County implements its SIP, it will continue to use the SCYFP, a group made up of executive managers of the major county agencies that serve children, community providers,

schools, child advocates and the local Regional Center. SCYFP also has two sub-groups, a middle-management committee that addresses procedural barriers to better services for children and youth, and a Case Management Committee that reviews the cases of hard-to-serve children and youth and develops a multi-disciplinary case plan or strategy for how the interests of the child can best be served.

#### Sonoma County Office of Education (SCOE):

The HSD has worked closely with SCOE on many issues. In the last year we began to address the implementation of AB490. In August and September, the two agencies jointly presented training to staff around the changes brought about by the new law. Child welfare managers routinely attend SCOE AB490 meetings. This deepening partnership between the two agencies will help the county better address the well-being issues (educational needs) of foster youth. Although this is not identified as an area in the Year One SIP, improved communication can only lead to improved outcomes for youth. SCOE has created an educational liaison position with office hours at HSD, who works to meet the educational needs of foster youth in both the child welfare and probation systems.

#### Differential Response:

In April, 2004, the HSD obtained funding from the First Five Sonoma to implement a differential response (DR) program in four geographic sites across the county. The program creates a partnership between the HSD and First Five Sonoma, and among the HSD and four CBOs. Three of the community agencies also applied for and received a United Way grant, allowing them to provide DR services to families with children over five. This is one of the first DR projects for children over five to be implemented in the state.

#### Santa Rosa Police Department and HSD Partnership:

The HSD will continue to station a child welfare social worker with the SRPD, enhancing the working relationship between the two agencies.

#### Redwood Empire Foster Parents Association (REFPA), State Adoptions, the Santa Rosa Junior College and the HSD:

These agencies will continue to work together to address the issues of foster parent recruitment, retention and training throughout the SIP period. The president of REFPA is actively involved in the workgroup, and conducted a telephone survey of ten foster parents as part of the Self Assessment.

#### Linkages/Project ESP:

Sonoma County is completing its second year with this exciting integrated services program. Child Welfare social workers, Employment and Training counselors, Mental Health and Alcohol and Other Drug Services (AODS) staff meet regularly in a multi-disciplinary team setting, along with experts on domestic violence, learning disabilities, community college resources, and a public health nurse to identify and create case plans for the problems of difficult-to-serve families. Families may receive TANF and be active to child welfare, or just be receiving TANF, or be unemployed or underemployed child welfare clients. In year three the program will focus on ways to utilize Workforce Investment Act (WIA) services for child welfare clients, identifying the unmet needs of child-only cases; and developing sustaining funding for the program.

#### Juvenile Justice Coordinating Council, (JJCC):

The JJCC, chaired by the Chief Probation Officer, serves as a monitoring board for at-risk youth throughout the county. The council, commissioned by the Board of Supervisors, includes staff from County agencies (Probation, County Administrator's Office, the juvenile court), and representatives from Community Based Organizations (CBOs) such as Social Advocates for Youth.

#### School-based Child Welfare Social Workers:

Three child welfare social workers are out-stationed at community schools. These three workers participate on local multi-disciplinary teams (MDT's) in the communities as part of Sonoma County's Promoting Safe and Stable Families (PSSF) program. These three high-need areas are also the sites of the county's differential response programs, allowing for improved communication and coordination of services for families who do not need to come into the child welfare system, but who need assistance.

## **B. Findings That Support Qualitative Change**

*Briefly describe any data collection techniques such as client and service provider focus groups, surveys, interviews and other data collection mechanisms. Information provided would include type of data collection technique, target audience, number of responses, and a brief description of how this information has been integrated into the SIP.*

In addition to analyzing the UC Berkeley data reports, Sonoma County utilized the following data collection techniques in developing its Self Assessment and its SIP.

#### Safe Measures and Business Objects:

The county utilized these two information management and report software programs to focus on each outcome measure by program and by unit. The two applications also gave the County the flexibility to develop lists of non-compliant cases down to the individual caseload ("drilling down") for a case review to determine the factors that might be affecting compliance. Safe Measures also allowed the County to create an historical timeline of outcomes over time to help identify trends.

#### Case Review:

For some outcome measures, an HSD, Family, Youth and Children's (FY&C) Division Planner Analyst reviewed the currently non-compliant cases to identify trends, factors or common characteristics.

#### Redwood Children Center Survey (RCC):

In a controlled study in 2003-2004, 190 parents were surveyed and asked to complete the Client Satisfaction Inventory (CSI) on the services provided by Redwood Children's Services. RCC is a forensic interview center for children who have been sexually abused. Of the 44 people who responded to the request to complete the inventory, 72.7 % rated the services as satisfactory or very satisfactory. The 18-question survey was statistically analyzed to determine possible problem areas that could be changed to achieve better outcomes and greater client satisfaction. Several areas needing review were better pre-orientation to the RCC and providing more focus

on a child's disclosure and what behavioral or emotional issues to anticipate following the interview.

Family Maintenance Survey:

FY&C Division utilized a research paper written June 2004 by a social worker for a Masters in Social Work project thesis. The research project explored client satisfaction and outcomes for families receiving voluntary family maintenance services (VFM). The survey was sent to 70 families. Twelve surveys were returned. While not statistically significant, the research suggested that different ethnic groups expressed their unmet needs in very different ways. This would in turn suggest that there should be different ways to structure service goals and assess needs according to the person's race or ethnic group. This information was used as we addressed Outcome 1B, Recurrence of Maltreatment.

Family Reunification Telephone Survey:

As part of its Self Assessment, FY&C developed a telephone survey for families who had reunified with their children within the past year. Fifty families were identified. Seven families responded to the survey. The results are addressed in the Attachment Section of the Self Assessment. The purpose of the survey was to identify what worked well with reunification and what might have created obstacles to reunifying. The information was used to address strategies for Outcome 3A/3C, Timely Reunification.

Foster Parent Telephone Survey:

Joan Froess, president of the Redwood Empire Foster Parents' Association (REFPA) conducted a telephone survey of ten county-licensed foster parents. She asked them what worked well, what didn't work well and what would make the program better. This information was used in addressing the systemic factor of Foster Parent Recruitment, Retention and Training.

ICWA Coordinator Survey:

An FY&C planner analyst spoke to two local Indian Child Welfare Act (ICWA) coordinators. The purpose of the interview was to 1) discuss the issue of over-representation of Native American children in child welfare and 2) address issues of meeting ICWA preferences. The ICWA preferences outcome has been identified as an item for the SIP by Sonoma County Juvenile Probation.

Staff Interviews:

The Planner Analysts met with individual line staff who had expressed an interest in the Self Assessment. Family Reunification workers were specifically interested in timely reunification. Staff input was used in the development of the SIP strategies for Outcome 3A/3D, timely reunification. For Outcomes 1B and 2C, FY&C managers met with Emergency Response workers to solicit input on the disproportionality of African American and Native American families in recurrence incidents. Information from both groups was incorporated into the SIP.

Emergency Response Staff Focus Group:

Managers convened this focus groups to discuss the disproportional representation of African American and Native American families in referrals received from the community and in recurrence incidents. The information from the group was used to develop the SIP strategies for the component 1 B- Recurrence of Maltreatment.

### Public Meetings:

The FY&C Division held two public meetings in May and June 2004 and received input from about 25 community members. Specific comments from the public are included in the Self Assessment. School staff who attended the meetings provided input about the emergency response referral process and teachers' reluctance to take an action they saw as "getting the family in trouble." This information will be incorporated into the SIP response to Outcome 1B, repeat maltreatment. Better communications with school personnel, combined with the county's Differential Response program, may help us offer services to families sooner, so that they do not have repeated referrals to the child welfare system. Several foster parents also attended one of the public meetings, and provided information about foster parent retention. Their feedback was used in addressing the systemic factor of Foster Parent Recruitment, Retention and Training.

In many areas the county continues to collect data on the outcomes identified in its SIP. Part of the process includes workgroups and focus groups that include line staff, foster parents and State Adoptions staff. Strategies identified in the workgroups include continued outreach to the community and our partner agencies such as SCOE and Probation.

## II. Safety Indicator 1B (State Enhanced Measure)

### Outcome/Systemic Factor: 1B Recurrence of Maltreatment

**County's Current Performance:** For children with a first substantiated referral, the percentage with a subsequent referral within twelve months is 12.40 % compared to the State average of 13.10 %. For children with one or more referrals in a year, the percentage with a subsequent referral within twelve months is 13.10% while the State average is 14.80 %. Overall, performance in the area of recurrence is strongly affected by the agency policy as of 2000 of using "at substantial risk but not abused" in order to open voluntary Family Maintenance cases. "Substantial risk" dispositions are not counted as substantiated cases. It has had the net effect of increasing the recurrence ratio (the ratio of recurrence incidents to substantiated cases of abuse) without any indication that recurrence incidents have been increasing since 2000 (see Sonoma County Self Assessment for a detailed analysis). The recurrence rates for Native American and African American are of particular concern as they are 2 and 3 times the rate respectively of the Caucasian and Hispanic groups. Due to the small overall population of the Native American and African American groups (approximately 3.1 % combined population) in Sonoma County, any planned improvement in recurrence rates for these two groups would have a small effect on the overall recurrence rate.

**Improvement Goal 1.0** Provide all staff with the tools for establishing effective interventions with Native American and African American families in order to reduce the recurrence rate by 2 % and 3 % for Native American and African American groups respectively in the next 24 months.

**Strategy 1.1** Set up effective staff training in cultural competency that discusses theory and also involves local service providers as trainers that could also be partners in future interventions.

**Strategy Rationale** Emergency Response workers meeting in a focus group stated that more recognition is needed of the reasons for the historical and culturally ingrained distrust of government held by these two groups that affects agency ability to intervene effectively in child abuse issues. At the same time, training needs a balance between theory and practice in structuring interventions. Local service providers with cross-cultural expertise should be the lead trainers. This would increase participation in training sessions by social workers that perceive current training as emphasizing theory and less on providing information that can be used in local case practice.

<b>Milestone</b>	<b>1.1.1</b> Conduct a staff training needs assessment in culturally competent practice and identify service needs in working with Native American and African American groups.	<b>Timeframe</b>	2 Months (11/30/04)	<b>Assigned to</b>	Department Training Analyst and Division Analyst
	<b>1.1.2</b> Contact the Bay Area Academy to outline a training proposal using local service providers with cross-cultural expertise as conjoint trainers.		4 Months (1/31/05)		Department Training Analyst, Section Manager and Division Analyst

Milestone	1.1.3 Engage culturally competent, local service providers and provide them orientation to agency needs and training for trainers via the Bay Area Academy.	Timeframe	6 Months (3/31/05)	Assigned to	Department Training Analyst, ER Supervisors, Division Analyst, Supervisor
	1.1.4 Provide staff training		8 Months (5/31/05)		Department Training Analyst
Strategy 1.2 Develop a systematic process of identifying specialized services for Native American and African American families.		Strategy Rationale Emergency Response workers state that there is no systematic way of sharing resource knowledge across the agency. There is a perceived lack of services specifically for Native American and African American groups. The lack (or lack of knowledge) of resources limits the effectiveness of ER and FM interventions. The county Spanish-speaking social worker unit is used as an example of information sharing and resource development.			
Milestone	1.2.1 Appoint a Supervisor within the agency that will be responsible for collecting and updating resources in the service array for Native American and African American families.	Timeframe	2 Months (11/30/04)	Assigned to	Section Managers
	1.2.2 Develop an internal on-line data bank of resources. Survey social workers about the existing service array for Native American and African American families and place information on-line. Update staff during division and unit meetings.		5 months (3/31/05)		Supervisor, Planner Analyst, ATM
	1.2.3 Supervisor working with staff volunteers will help to identify additional resources for Native American and African American families that staff have identified as the most common service needs: mental health, anger management, cross cultural parenting classes and drug treatment.		8 months (5/31/05)		Supervisor and staff volunteers
Strategy 1.3 Seek out partnerships and build on existing ones in order to expand the service arrays for Native American and African American families.		Strategy Rationale There is a perceived lack of services specifically for Native American and African American groups. The lack of resources limits the effectiveness of ER and FM interventions and can lead to recurrence. New agency programs such as Differential Response should be structured to promote culturally competent practices.			

Milestone	1.3.1 Contact African American and Native American professional and community service clubs, religious organizations, local Indian tribes and neighboring counties to make known the agency service needs. Identify and/or develop new resources.	Timeframe	9 Months (6/30/05)	Assigned to	Section Managers, ER Supervisors and staff volunteers
	1.3.2 Work with community based organizations involved in Differential Response and Promoting Safe and Stable Families programs to capture racial and ethnic data and develop culturally competent practices.		9 Months (6/30/05)		Division Director, Section Managers, Supervisors
Improvement Goal 2.0 Assess and better understand the nature of the disparities involving Native American and African American families in referrals and recurrence rates.					
Strategy 2.1 Clearly identify the reporting sources and the nature of the community referrals of alleged child abuse involving Native American and African American children.		Strategy Rationale Referral rates involving Native American and African American groups are 2 to 3 times higher than expected when compared to that of other groups, while in-person response rates within the agency show no bias toward these groups, which indicates a uniform intake assessment.  Disproportionate referral rates for Native American or African American groups may indicate reporting bias by community members.			
Milestone	2.1.1 Develop reports detailing types of reports and referral sources to look for data trends. Identify particular areas of county, schools, or mandated reporters that are source of referrals.	Timeframe	3 months (12/31/04)	Assigned to	Planner Analyst
	2.1.2 Develop an outreach program to address any findings of the reports.		8 months (5/30/05)		Section Managers, ER Supervisors
	2.1.3 Offer mandated reporter training that addresses racial/ethnic issues. Include training and materials for the Speakers Bureau volunteers.		Ongoing 2004-2005		Planner Analyst and Speakers Bureau volunteers



<b>Strategy 2.2</b> Increase staff awareness of the importance of collecting racial and ethnic data when completing an initial assessment.		<b>Strategy Rationale</b> Missing racial and ethnic data involves a significant portion of the overall population. Many people are bi-racial or multi-ethnic, which affects data reporting. Also, asking about racial and ethnic data during an assessment may lead to identifying more family resources that can be leveraged during an intervention.			
Milestone	<b>2.2.1</b> Assess and plan staff training as needed in the area of collecting and using ethnic and racial information as part of a comprehensive client intake assessment.	Timeframe	3 months (12/31/04)	Assigned to	Section Managers, Planner Analyst
	<b>2.2.2</b> Identify an internal process for consistently inputting racial/ethnic data into CWS/CMS.		4 months (1/31/05)		Planner Analyst, ER Supervisors, Section Manager, CWS/CMS Application Trainer/Mentor (ATM)
	<b>2.2.3</b> Monitor data through Safe Measures and Business Objects reports.		Ongoing 2004-2005		Planner Analyst
<b>Strategy 2.3</b> Review the agency policy for use of “at substantial risk but not abused” to ensure it is being used uniformly and appropriately.		<b>Strategy Rationale</b> Use of “substantial risk” as a disposition is meant to promote non-adversarial interventions. Its use should be limited and guided by agency policy. Substantial risk dispositions affect the percentage ratios in all recurrence counts, and clarifying and limiting its use could lead to a drop in recurrence rates overall.			
Milestone	<b>2.3.1</b> Review the policy on the use of “substantial risk” by intake staff. Ask for additional data reports if needed.	Timeframe	3 Months (12/31/04)	Assigned to	Section Managers, ER Supervisors, Planner Analyst, Division Director
	<b>2.3.2</b> Provide training as needed to intake and ER field staff during unit meetings on the use of “substantial risk”.		4 Months (1/31/05)		Planner Analyst, Section Managers, ER Supervisors
	<b>2.3.3</b> Monitor through Safe Measures changes in recurrence ratio.		Ongoing 2004-2005		Planner Analyst
<b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b> See Goal 2.0 above regarding the service array.					
<b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b> See Goal 1.0 regarding culturally competent social work practice training.					
<b>Identify roles of the other partners in achieving the improvement goals.</b> Bay Area Academy for developing a staff customized curriculum. Expand the service array by partnering with religious organizations, business and service clubs, and African American and Native					

American organizations. An expanded service array would optimize child welfare interventions and possibly reduce recurrence rates.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**

Division 31 regulations on developing case plans needs to be expanded from 30 to 60 days. This would allow more time for ER workers to establish rapport and increase the likelihood of finding appropriate resources and thus to develop more effective interventions by making effective referrals for services to families.

### III. 2C Timely Social Worker Visits with Child (State)

#### Outcome Factor: Timely Social Worker Visits with Child

**County's Current Performance:** In the last quarterly report for 2003 Sonoma County recorded timely monthly contacts in 58.2 % of all foster care cases compared to the State average of 72.3 %.

**Improvement Goal 1.0** Sonoma County will average 73 % compliance with timely contacts by the first quarter of 2005.

**Strategy 1.1** Publish expectation of data entry of monthly contacts; utilize Safe Measures to monitor entry; involve supervisors in the process of encouraging and maintaining data entry.

**Strategy Rationale** With the introduction of Safe Measures in September 2003, FY&C saw a 30% increase in compliance in timely visits. Interviews with staff and supervisors indicate that visits are completed timely the majority of the time, and were simply not being entered into CWS/CMS in a timely manner.

Milestone	1.1.1 Develop and publish expectations that contacts be entered into CWS/CMS no later than the last day of the month following the month of contact (for example, for a June visit, no later than July 31)	Timeframe	Completed	Assigned to	Section Managers and Division Director
	1.1.2 Section Managers will review Safe Measures reports monthly with supervisors and clarify any exceptions to compliance		Begun July, 2004		Section Managers and Supervisors
	1.1.3 Supervisors will review Safe Measures reports on contacts once monthly with staff in weekly scheduled supervision, and address any exceptions to compliance		Begun July, 2004		Supervisors

**Strategy 1.2** The Placement Section Manager, the CWS/CMS Application Trainer/Mentor (ATM) and Planner Analyst will develop a procedure for the correct identification and coding of youth who are Whereabouts Unknown; and review the existing procedure for using CWS/CMS to track visit exceptions. If necessary, training on both procedures will be provided to placement staff.

**Strategy Rationale** A case review of non-compliant cases revealed that many had visit exceptions or were whereabouts unknown and were not correctly coded in CWS/CMS.

Milestone	1.2.1 Develop CWS/CMS coding procedure for youth who are “Whereabouts Unknown.”	Timeframe	1 Month (10/31/04)	Assigned to	Planner Analyst and CWS/CMS ATM
	1.2.2 Review existing procedure on the use of Case Plan in CWS/CMS to track visit exceptions.		2 Months (11/30/04)		Planner Analyst and CVWS/CMS ATM
	1.2.3 If more CWS/CMS training is needed, work with Staff Development and CWS/CMS ATM to develop and deliver training.		8 Months (5/31/05)		Planner Analyst, CWS/CMS ATM, Staff Development Training Coordinator, UC Davis
Strategy 1.3 Review alternatives and develop the best plan for providing dedicated time for staff to enter contacts		Strategy Rationale Staff interviewed stated that finding blocks of time to enter contacts was challenging or difficult.			
Milestone	1.3.1 Develop alternatives for ways to create protected time for contact entry.	Timeframe	2 Months (11/30/04)	Assigned to	Section Manager, Planner Analyst and Contact Note work group
	1.3.2 Poll staff for best alternative.		2 Months (11/30/04)		Planner Analyst, supervisors
	1.3.3 Implement the most effective appropriate solution.		3 Months (12/31/04)		Section Managers, Supervisors
Strategy 1.4 Summer Collaboration: During the summer months, when schools are not in session and there is a drop in the numbers of referrals received by Emergency Response, ER staff will assist placement staff by completing planned visits.		Strategy Rationale This flexible use of staff allows the FY&C to meet crucial work tasks and keep the workload even between programs. This also fosters an ongoing sense of teamwork between Emergency Response and the placement programs.			
Milestone	1.4.1 Each placement worker will develop a monthly list of out-of-county or remote visits. The list will be posted and available ER staff will sign up to volunteer to complete specific visits.	Timeframe	July - August 2004 – ongoing (this stratagem is already in effect).	Assigned to	Section Managers

<b>Strategy 1.5</b> Explore technological solutions to contact entry		<b>Strategy Rationale</b> Inexpensive technology exists that would allow staff to enter notes from the field or from home, ensuring timeliness and accuracy. This stratagem is limited by cost, connectivity and security issues. A recommendation will be made to senior management regarding the use of technology but the HSD does not expect to see implementation in Year One.			
Milestone	<b>1.5.1</b> Request that the division technology committee address the issue of technological solutions.	Timeframe	5 Months (2/28/05)	Assigned to	Section Manager
	<b>1.5.2</b> Technology committee will submit a recommendation to the managers for review.		6 Months (3/31/05)		Technology Committee
	<b>1.5.3</b> Managers will provide recommendation to Division Director		7 Months (4/31/05)		Section Managers
<b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b> CWS/CMS is an important systemic factor.					
<b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b> Training needs are addressed in the strategy section.					
<b>Identify roles of the other partners in achieving the improvement goals.</b> In-house Information Technologies may play a role in the exploration of technological enhancements.					
<b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b> None identified.					

## IV. Permanency Indicators 3A, 3E

### Outcome/Systemic Factor: 3A, 3E Length of time to exit foster care into reunification

**County's Current Performance:** This outcome measure calculates the percentage of children that leave foster care placement into reunification in under 12 months. On Federal outcome measure 3E the county performance was 35.9 % compared to the Federal measure of 76.2 %. On the State entry cohort 3A it was 10.9 % compared to the State average of 35 %. Several factors were identified during the Self Assessment Process (SAP) as affecting county performance such as data related issues, a low removal rate, county policies on early reunification and lengthy trial home visits. The following SIP plan is developed with the goal of maintaining the county's historically low re-entry into care following reunification.

### Improvement Goal 1.0 Improve data quality in the time to reunification measures.

**Strategy 1.1** Review the policy and procedures on trial home visits and issue guidelines for its use in returning children safely to their homes.

**Strategy Rationale** During the SAP it was noted that there was a lack of timely closure of placement episodes following trial home visits. This led to cases not being counted as a successful reunification. There also seemed to be no consistent social worker practice with regard to length of trial home visit, or when in the life of a case to use trial home visits. Shorter trial visits and a timely episode closure should lead to a quick increase in the time to reunification measures.

<b>Milestone</b>	<b>1.1.1</b> Review the policy and procedures of trial home visits.	<b>Timeframe</b>	3 Months (12/31/04)	<b>Assigned to</b>	Section Managers, Division Director, Supervisors, County Counsel, Juvenile Court Team
	<b>1.1.2</b> Provide guidelines on the use of trial home visits and the timely closure of placements episodes following reunification.		5 Months (2/28/05)		Section Manager
	<b>1.1.3</b> Monitor placement episode closures via Safe Measures to assure compliance.		Ongoing Monthly (12/01/04 – 2005)		Supervisors, Section Manager

**Improvement Goal 2.0** Undertake a systematic review of current reunification services with the goal of developing best practice strategies for achieving permanency for all children with a focus on fairness and equity.

<b>Strategy 2.1</b> Conduct a series of training sessions and focus groups with foster parents, social workers and relative caregivers to evaluate issues in achieving permanency for all children across all racial and ethnic groups.		<b>Strategy Rationale</b> The SAP data indicated that African American children are somewhat less likely to reunify but do achieve much higher levels of placement stability with relatives than do other groups. Placement with relatives also tends to lengthen time to reunification.  This strategy would obtain information on how parents, relatives and children of African American descent react to a long reunification period, and what part adoption and guardianship plays across different racial and ethnic groups. The information can also be used to assess issues of agency cultural competency.	
<b>Milestone</b>	<b>2.1.1</b> Convene a staff training day to discuss issues of fairness and equity in child welfare agencies. From that, develop breakout focus groups regarding fairness and equity in placement services.	<b>Timeframe</b>	<b>Assigned to</b>
	<b>2.1.2</b> Convene a series of joint training sessions for foster parents and social workers on issues in achieving permanency for all children.	3 Months (12/31/04)	Training Analyst, Managers, Placement Supervisors
	<b>2.1.3</b> Develop partnerships for a kinship support service to provide support for relative caregivers that will increase the likelihood of permanency to all children.	5 Months (3/31/05)	Placement Supervisor, Section Manager
<b>Strategy 2.2</b> Evaluate and implement best practices for achieving permanency for children.		<b>Strategy Rationale</b> Best practice models in child welfare services offer proven strategies for improving outcomes. Research by the American Humane Society and Casey Family Services indicates that the use of evaluation tools and shared decision-making models improve fairness and equity outcomes.	
<b>Milestone</b>	<b>2.2.1</b> Evaluate, test and implement the use an early prognosis tool for use by the Concurrent Planning and Adoptions social workers. The use of this tool will help in earlier permanency planning for children.	<b>Timeframe</b>	<b>Assigned to</b>
		8 Months (5/31/05)	Planner Analyst, Placement Supervisors, State Adoptions social worker

Milestone	2.2.2 Review policy on supervised visitation and provide better evaluation tools for the quality of visits. Quality and frequency of visitation has high correlation with reunification.	Timeframe	2 Months (11/30/04)	Assigned to	Planner Analyst, Section Manager and Placement Supervisors
	2.2.3 Pursue the development of Administrative Reviews in Juvenile Court. This would make for less adversarial reviews and allow more shared decision-making on permanency decisions for all children.		8 Months (5/31/05)		Section Manager. Division Director, County Counsel, Juvenile Court Team
Describe any additional systemic factors needing to be addressed that support the improvement plan goals. The service array as a whole is adequate, however, in outlying county areas there is a lack of specialized services, especially for Spanish-speaking clients.					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. Culturally competent practice training (already planned for SIP component 1B).					
Identify roles of the other partners in achieving the improvement goals. Bay Area Academy for training.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. Extending the time to reunification past 12 months is needed especially in cases of children over the age of 12 or children with mental health issues. Children who enter care at or after the age of 12 have increasing less chance for timely reunification. Children in need of residential care are also less likely to achieve reunification or permanency.					



## V. Foster Care Recruitment Retention and Training

### Systemic Factor: Foster Care Recruitment Retention and Training

**County's Current Performance:** The number of licensed foster homes has declined by approximately 54% in the last three years. During the Self Assessment Process (SAP) foster parents expressed a desire for closer connections with social workers and knowledge of and input into the case plans of foster children. Systemic factors like the high cost of housing and the relatively small compensation of foster care contribute to the decline in foster homes. The county's Emergency Foster Home (EFH) program provides an excellent model for sustaining foster care. The EFH has an array of special services such as monthly training, small local "cluster meetings" in foster homes, a mentoring program, special care increments, and an assigned social worker that provides support and coordinates EFH activities.

**Improvement Goal 1.0** Assess the current foster care recruitment and retention efforts and develop strategies that will lead to increases in people applying for a license and also remaining as foster parents.

**Strategy 1.1** Convene a Foster Care Recruitment and Retention (FCRR) Workgroup composed of social work staff, Redwood Empire Foster Parent Association and Partnership in Parenting teachers to study current efforts and develop new strategies in recruitment and retention.

**Strategy Rationale** Forming this working partnership brings in diverse points of view about foster parenting and builds a cohesive effort to draw in those interested in foster parenting and for supporting current foster parents. The loss of licensed foster homes is most notable in the area of long-term foster homes that provide care for reunification and permanency foster children.

Milestone	1.1.1 Convene the group and develop methods and goals for the workgroup.	Timeframe	June 2004 (completed)	Assigned to	Placement Supervisor, Section Manager
	1.1.2 Survey the existing long-term foster homes and long-term foster parents that have subsequently closed their licenses to determine factors associated with decisions to continue or discontinue.		2 Months (11/30/04)		FCRR Workgroup
	1.1.3 Continue to review retention methods and propose solutions.		6 Months (3/31/05)		FCRR Workgroup, Placement Supervisor, Foster Care (FC) Licensing Supervisor
Strategy 1.2 Improve targeted recruitment efforts and improve response times all through the process.		Strategy Rationale Literature indicates that it takes people up to a year to decide to become foster parents. Efforts to engage people as soon as they show interest, especially after targeted recruitment presentations will increase likelihood of success.			

Milestone	1.2.1 Arrange foster care recruitment speaking opportunities in churches, synagogues, service clubs and ethnic community organizations including the Spanish speaking community	Timeframe	1/31/05 - ongoing	Assigned to	FCRR Workgroup, Foster Care Licensing Supervisor, Placement Supervisor
	1.2.2 Respond to foster care inquiries as quickly as possible. Responses to people who show an interest in becoming foster parents are sent out within a week. Previously responses took two to three weeks.		Ongoing		Foster Care Licensing Supervisor and Licensing Staff
	1.2.3 Review existing foster care recruitment efforts. Assess the success of newspaper advertising and look for other avenues for targeted recruitment.		2 Months (11/30/04)		Foster Care Licensing Supervisor, FCRR Workgroup, Placement Supervisor
Strategy 1.3 Assess the foster care orientation process in materials and presentations in order to also target people interested in providing longer-term foster care so they will continue in the licensing process.		Strategy Rationale The people seeking adoption or interested in providing short-term emergency care will typically continue in the process to obtain a license. The agency need is for people interested in providing longer-term foster care for reunification or to provide longer term foster care as needed. Improving this area may lead to more people moving from the orientation to training.			
Milestone	1.3.1 Review current orientation materials and approaches and propose new strategies.	Timeframe	2 Months 11/31/04	Assigned to	FCRR Workgroup, Placement Supervisor
Describe any additional systemic factors needing to be addressed that support the improvement plan goals.					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. Foster care recruitment and retention based on best practice; training for social work staff on the importance of foster parents as an invaluable resource, and in ways to work collaboratively with foster parents.					
Identify roles of the other partners in achieving the improvement goals. Inter-agency and community collaboration: partnering with the Redwood Empire Foster Parent Association and other community organizations is a central component of improving Foster Care Recruitment and Retention. Leaders and members of the Sonoma County Foster Parent’s Association will be working with social work staff in implementing and evaluating SIP strategies.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. Higher foster care rates for recruitment and retention of long-term foster care homes. The foster care					

rates should reflect the actual cost of living in one of the most expensive counties in the country that will meet the needs of children in foster care.

## VI. CWS/CMS Training

<b>Systemic Factor: CWS/CMS Training</b>						
<b>County's Current Performance:</b> Currently, CWS/CMS training is included in all CWS service components.						
<b>Improvement Goal 1.0</b> Staff will receive consistent training and have available printed or online materials that will assist them in CMS tasks.						
<b>Strategy 1.1</b> Develop a CWS/CMS training lab that uses either the training region or Scenario Manager in order to provide consistent training to groups of staff.			<b>Strategy Rationale</b> A lab enables the FY&C Division to use its CWS/CMS staff more efficiently by providing training to groups instead of one-on-one and allows for better transfer of training by giving participants hands-on practice.			
Milestone	1.1.1	Configure higher-end PCs from the equipment replacement in a laboratory setting.	Timeframe	June 2004-- completed	Assigned to	CWS/CMS ATM and HSD Information Technologies Unit.
	1.1.2	Install Scenario Manager on 12 PCs in the computer lab.		June 2004--completed		CWS/CMS ATM and HSD Information Technologies Unit.
	1.1.3	Pursue use of the Training region through the county training server once the training contract is signed and the training region re-opened.		1 Month (10/31/04)		Planner Analyst and Division Director.
<b>Strategy 1.2</b> FY&C will utilize its 2003-04 and 2004-05 UC Davis allocated training days to provide staff training on needed areas in CMS.			<b>Strategy Rationale</b> Use an available resource to provide training to strengthen new habits and support policy changes.			
Milestone	1.2.1	Provide training to 50 staff on Case Plan, Court Module and AFCARS/AB636 Outcome Measures	Timeframe	June 2004--completed	Assigned to	CWS/CMS ATM, Planner Analyst and UC Davis instructor
	1.2.2	Develop and deliver a training needs assessment for FY 2004-05 for UC Davis.		1 Month (10/31/04)		CWS/CMS ATM, Planner Analyst, Section Managers
	1.2.3	Schedule and deliver basic and advanced CWS/CMS training to 40 staff in FY 2004-05 through UC Davis.		8 Months (5/31/05)		Planner Analyst, Section Managers, Supervisors and CWS/CMS ATM

<b>Strategy 1.3</b> The FY&C Division will develop and provide staff with detailed training materials, and access to web-based training.		<b>Strategy Rationale</b> Staff who move from one CWS service component to another, or who have to complete a module they work with infrequently, will enter more accurate, complete data if they have current procedural data to use.			
<b>Milestone</b>	<b>1.3.1</b> Review, develop, publish and update CWS/CMS training materials.	<b>Timeframe</b>	8 Months (5/31/05)	<b>Assigned to</b>	CWS/CMS ATM, Planner Analyst
<b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b> This is a systemic factor.					
<b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b> Access to the training region and the provision of training database data would assist by providing a more robust and realistic training environment.					
<b>Identify roles of other partners in achieving improvement goals.</b> UC Davis as a training resource. CDSS could assist by providing training region data that could be used to simulate real-life case situations.					
<b>Identify any regulatory or statutory changes needed to support the accomplishments of the improvement goals.</b> Direction and policy from CDSS on identifying, defining, and cross-reporting allegations of abuse in out-of-home care, particularly when the allegation is made against a CCL-licensed facility.					

